

## SHIREMANSTOWN UNITED METHODIST CHURCH REQUEST FOR USE OF THE CHURCH FACILITIES

Group/Organization Name:		Number of People: <small>(include a number if only approximate)</small>	
Requested Use of the Facilities:			
Rooms(s) Requested:			
Event Time - include AM/PM:		Day and Date Requested:	
<small>set up</small>	_____ to _____	<small>lock up</small>	_____ (day of week) _____ (month) _____ (day of month) (year)
( )	_____ to _____	( )	_____
( )	_____ to _____	( )	_____
( )	_____ to _____	( )	_____

Request: no more than 3 dates per sheet. include a calendar sheet if needed. 788

**RESPONSIBLE PERSON IN CHARGE AND PRESENT AT EVENT:**

NAME: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_  
City & State. INCLUDE ZIP CODE

Home Phone: \_\_\_\_\_  
 Work Phone: \_\_\_\_\_

SIGNATURE OF RESPONSIBLE PERSON: _____
DATE: _____

<i>Special Equipment Needed:</i>

(OFFICIAL USE ONLY)	
Room Fee:	\$ _____
Custodial Fee:	\$ _____
(Other Fees):	\$ _____
TOTAL:	\$ _____
Deposit Due:	\$ _____
Balance:	\$ _____
(OFFICIAL USE ONLY)	

**NOTE:** Approval of requested use is subject to strict compliance with the Guidelines for Use of the Church Facilities. (Attached) Failure to adhere to these guidelines may result in disapproval of future requests of your group or organization for use of the church facilities.

All use of the church facilities at the sole risk of the requesting group or organization. By submitting this request, the requesting group or organization, for itself, its members and guests waives any claims arising from personal injury or property damage occurring during its use of these facilities. The requesting group and the responsible person in charge agree to hold the SHIREMANSTOWN U.M.C., its officers and trustees, harmless from any cost, expenses or liabilities arising from such use.

Approved by S.U.M.C.: \_\_\_\_\_ Date: \_\_\_\_\_

Received in Church Office by: \_\_\_\_\_ Date: \_\_\_\_\_

**ANY CHANGES MADE AFTER THE APPROVAL MUST BE RESUBMITTED AS A NEW REQUEST.**

# Floor Plan Fellowship Center

